

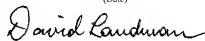
## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Hack et al.  
Appl. No. : 10/817,239  
Filed : April 5, 2004  
For : INDIUM SUPPLEMENT  
COMPOSITIONS AND METHODS  
THEREFOR  
Examiner : Pak, John, D.  
Group Art Unit : 1616

I hereby certify that this correspondence and all marked  
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Patent and Trademark Office addressed to: Commissioner for  
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April 21, 2006

(Date)



David Landman, Reg. No. 51,324

## REVOCATION AND POWER OF ATTORNEY

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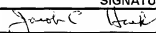
Please find enclosed two signed and completed Forms PTO/SB/82 revoking any previous powers of attorney in the subject application and appointing the undersigned having Customer Number: 60878 with a New Power of Attorney to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.



David Landman, Ph.D.  
Reg. No.: 51,324

1617 Cardinal Bluff Dr. #202  
Las Vegas, Nevada 89128  
Telephone: 702-243-6699  
Facsimile: 702-243-6699  
E-mail: landalcip@cox.net

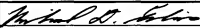
<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	10/817,239
	Filing Date	April 5, 2004
	First Named Inventor	Hack, Jacob, C.
	Art Unit	1616
	Examiner Name	Pak, John, D.
	Attorney Docket Number	JCHACK 0001P

<b>I hereby revoke all previous powers of attorney given in the above-identified application.</b>	
<input type="checkbox"/> A Power of Attorney is submitted herewith.  <b>OR</b> <input checked="" type="checkbox"/> I hereby appoint the practitioners associated with the Customer Number: <span style="border: 1px solid black; padding: 2px 20px;">60878</span>	
<input checked="" type="checkbox"/> Please change the correspondence address for the above-identified application to: <div style="display: flex; align-items: center; margin-top: 5px;"> <input checked="" type="checkbox"/> The address associated with Customer Number: <span style="border: 1px solid black; padding: 2px 20px;">60878</span> </div>	
<b>OR</b>	
<input type="checkbox"/> Firm or Individual Name	
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I am the. <input checked="" type="checkbox"/> Applicant/Inventor. <input type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)	
<b>SIGNATURE of Applicant or Assignee of Record</b>	
Signature	
Name	Jacob C. Hack
Date	March 20, 2006
Telephone	702-383-9664
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	
<input checked="" type="checkbox"/> *Total of <u>2</u> forms are submitted	

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 422 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	10/817,239
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<b>SIGNATURE of Applicant or Assignee of Record</b>			
Signature			
Name	Richard D. Tobias		
Date	March 20, 2006	Telephone	702-383-9664
<small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</small>			
<input checked="" type="checkbox"/> *Total of <u>2</u> forms are submitted			

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